# Pilot History Form

MarshMcLennan Agency

| | | | |
|---|---|---|---|
| **Full Name** | | | |
| **City** | | **State:** | |
| **Phone** | | **Email:** | |
| **Month/Year of Birth** | | **FAA Certificate #:** | |
| **Primary Occupation** | | | |
| **Employer** | | **Employment Start Date:** | |
| **What percentage of your time is spent on non-flying duties? If any, explain** | | | |
| **Name of Aircraft Owner** | | **Tail #:** | |
| **Professional org membership & applicable member number?** | | | |

- ☐ Private Pilot
- ☐ Commercial Pilot
- ☐ Airline Transport Pilot
- ☐ Flight Instructor
- ☐ Multi-Engine Land
- ☐ Instrument
- ☐ Helicopter
- ☐ Seaplane
- ☐ Designated Examiner
- ☐ A&P

Type Ratings / Other:

_____
_____
_____
_____
_____

- ☐ Pro-Pilot Full Time
- ☐ Pro Card
- ☐ Employee of Named Insured
- ☐ Contract Pilot
- ☐ No Accidents
- ☐ No Waivers
- ☐ No Violations
- ☐ Basic Medical

Medical Class/Date:

_____

Waivers
(If none, write none)

_____
_____
_____

## TOTAL LOGGED PILOT HOURS

| | Total Hours | | Total Hours | | Total Hours | | Total Hours |
|---|---|---|---|---|---|---|---|
| **Total Logged All Aircraft** | | **Single Engine Turbo-Prop** | | **Helicopter** | | **Amphibious** | |
| **Retractable Gear** | | **Multi-Engine Turbo-Prop** | | **Turbine RW** | | **Seaplane** | |
| **Multi-Engine** | | **Jet** | | **Tailwheel** | | **Instructor** | |
| **Last 90 Days All Aircraft** | | **Last 12 Months All Aircraft** | | **Glider** | | **Military** | |

## TOTAL MAKE & MODEL PILOT HOURS

| Make & Model Flown | Pilot-In-Command | | Second-In-Command | | Make & Model Flown | Pilot-In-Command | | Second-In-Command | |
|---|---|---|---|---|---|---|---|---|---|
| | Total Hours | Last 12 Months | Total Hours | Last 12 Months | | Total Hours | Last 12 Months | Total Hours | Last 12 Months |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

## TRAINING AND REFRESHER TRAINING

**(Please attach relevant training completion certificate or email to MMA-JSLaeroinfo@marshmma.com.)**

| | | |
|---|---|---|
| **Last Biennial Flight Review or equivalent** | **Date:** | **Aircraft Type:** |
| **Last Instrument Proficiency Check** | **Date:** | **Aircraft Type:** |

| Ground & Flight Training Provider | Simulator or Aircraft Based | Aircraft Type | Initial or Recurrent | Date |
|---|---|---|---|---|
| **1.** | | | | |
| **2.** | | | | |
| **Do you participate in any additional training? If so, explain** | | | | |

**Please explain any YES answers to the following questions in the remarks section below or on reverse side.**

| | | |
|---|---|---|
| 1. As pilot in command or co-pilot have you had or been involved in: any aircraft accidents or incidents previous 10 years? | ☐ No | ☐ Yes |
| any aviation insurance claims or losses previous 10 years? | ☐ No | ☐ Yes |
| 2. As pilot in command or co-pilot have you been found guilty of or been penalized, disciplined, fined or violated for any civil or military Air Regulations? | ☐ No | ☐ Yes |
| 3. Has your automobile drivers license or pilot certificate ever been suspended or revoked? | ☐ No | ☐ Yes |
| 4. Have you had any automobile accidents, convictions for automobile DUI or drug use in the previous 10 years? | ☐ No | ☐ Yes |
| 5. Have you ever been convicted or pleaded guilty to a felony? | ☐ No | ☐ Yes |

| | |
|---|---|
| **Remarks:** | |

*I represent that the answers given are true and complete to the best of my knowledge and belief and that no material information has been withheld.*

Signature: _____ Date: _____